

Non-Lead Form 303 Household Hazardous Waste Collection Information For Fiscal Year 2004-2005

Purpose of the Form

Each jurisdiction in California is mandated to complete CIWMB Form 303 (Form) annually. The amount of household hazardous waste (HHW) and its method of management must be reported on the Form 303 (California Code of Regulations, Title 14, Sections 18751.2). It specifically fulfills the reporting requirements of the Household Hazardous Waste Element of the California Integrated Waste Management Board's (CIWMB) Countywide Integrated Waste Management Plans. Form 303 submittal is also regulated to include the Department of Toxic Substances (DTSC) (Health and Safety Code Section 25218.9) to collaboratively maintain HHW volume totals with the Board for all HHW collection events, facilities, and programs within the state.

Since we do not have you listed as **the lead agency of an HHW collection program**, you need to **complete and submit theNonLeadForm303.doc** to satisfy the regulatory requirement. If we are mistaken and your jurisdiction is a Lead Agency, please download the complete Form 303 on our website at: <http://www.ciwmb.ca.gov/HHW/Reporting/default.htm>.

*By **November 1, 2005** (for this year only), you must provide the completed NonLead Form303.doc via email to Form303@dtsc.ca.gov or by mail to the DTSC address indicated below:*

**Department of Toxic Substances Control (DTSC)
Household Hazardous Waste (HHW) Unit-Form 303
P.O. Box 806
Sacramento, CA 95812-0806**

Before submitting the Non Lead Form 303 as an email attachment, please save the document as a word file with your jurisdiction name. i.e. NonLeadForm303Sacramento.doc and keep a copy for your records.

See Next Page for Form

Non-Lead Form 303 Household Hazardous Waste Collection Information For Fiscal Year 2004-2005

REPORTING REQUIREMENT

_____ Check here and complete only if your agency **did not** have a collection program or **was not the lead** for an HHW collection program. Return the completed NonLeadForm303.doc to the DTSC address indicated above.

JURISDICTION

Public Agency Reporting:
Agency Sponsoring Program (Who is the lead for your agency?):
Program Service Area (geographic area of program):
Mailing Address:
City:
State:
Zip Code:
County:
HHW Program Manager:
Phone Number:
Fax Number:
Email Address:

Any Comments?

Submit to DTSC By November 1, 2005 at

Form303@dtsc.ca.gov

Or by mail to:

**DTSC
HHW Unit-Form 303
P.O. Box 806
Sacramento, CA 95812-0806**